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| Division of Medicaid | New: | Date: |
| State of Mississippi | Revised: X | Date: 07/01/05 |
| Provider Policy Manual | Current: | 06/01/07 |
| Section: Pharmacy | Section: 31.10 | |
| | Pages: 4-2 | |
| Subject: Refills/Renewals of Prescription Drugs | Cross Reference: | |

A written, faxed or telephoned prescription may be refilled, in compliance with the prescriber's order, up to a limit of eleven times, if compliant with state and/or federal regulations and guidelines. Refills are reimbursable only if specifically authorized by the prescriber. A prescription is not to be refilled and charged to DOM with greater frequency than the approximate interval of time that the dosage regimen of the prescription would indicate, unless extenuating circumstances are documented which would justify the shorter interval of time before the refilling of the prescription. Quantities billed to DOM in excess of the prescriber's authorization are **NOT** reimbursable.

Auto Refills

Mississippi Medicaid does not pay for any refill without an explicit request from a beneficiary or the beneficiary's responsible party, such as a caregiver, for each filling event. The possession, by a provider, of a prescription with remaining refills authorized does not in itself constitute a request to refill the prescription.

Mississippi Medicaid beneficiaries cannot waive the explicit refill request and enroll in an electronic automatic refill in pharmacies.

Early Refill/Renewal

~~Medicaid provides up to a 31-day supply of a medication to Medicaid beneficiaries each month. Medicaid will not pay for a prescription refill until 85% of the days supply of any Schedule III narcotic drug and 75% of the day's supply of all other drugs have elapsed, as indicated on the prescription. For example, a prescription for a 31-day supply has been 75% used by the 26th day after it was dispensed and it may be refilled at that time. Any attempt to refill a prescription through the Point-of-Sale system before the 26th day will be automatically denied.~~

~~By law, Schedule II narcotics cannot be refilled; therefore, Medicaid will not pay for a prescription refill for any Schedule II narcotic. Nor will Medicaid pay for a new prescription until 85% of the days supply has elapsed.~~

Medicaid provides up to a 31-day supply of a medication to Medicaid beneficiaries each month.

- Medicaid will not pay for a prescription refill until 75% of the day's supply of the drug has elapsed as indicated on the prescription. For example, a prescription for a 31-day supply has been 75% used by the 23rd day after it was dispensed and it may be refilled at that time. Any attempt to refill a prescription through the Point-of-Sale system before the 23rd day will be automatically denied.
- Medicaid will not pay for a prescription refill until 85% of the days' supply of any controlled substance (Schedule III, IV, and V) as indicated on the prescription. For example, a prescription for a 31-day supply has been 85% used by the 26th day after it was dispensed and it may be refilled at that time. Any attempt to refill a prescription through the Point-of-Sale system before the 26th day will be automatically denied.
- By law, Schedule II narcotics cannot be refilled; therefore, Medicaid will not pay for a prescription refill for any Schedule II narcotic, nor will Medicaid pay for a new prescription until 85% of the days supply has elapsed. For example, a prescription for a 31-day supply has been 85% used by the 26th day after it was dispensed.

Medicaid may permit an early refill under certain circumstances: when the beneficiary's life is at risk; when an acute clinical condition requires extra medication to stop or mitigate further morbidity; or when the prescriber increases the dosing frequency or increases the number of tablets per dose. Medicaid will not authorize an early refill for medications used for palliative treatment or when the beneficiary has displayed gross negligence, or has a history of early refill/renewal requests.

Early Refill/Renewal Authorization

Medicaid may permit an early refill of an original claim when (1) billed by the same pharmacy and (2) under one of the following two circumstances:

1. The client's life is at risk; when an acute clinical condition requires extra medication to stop or mitigate further morbidity; or
2. The prescriber either (a) increases the dosing frequency or (b) increases the number of tablets per dose. The prescriber must document the change in dosage or frequency by writing or phoning in a new prescription.

Please note that the physician(s) who wrote the original prescription must initiate any request for additional medication.

Replacement

Medicaid does not generally pay for replacement of prescriptions that are lost, stolen or otherwise destroyed. Replacement of prescriptions is the beneficiary's responsibility.

A replacement may be approved only if the monthly service limit has not been reached.

If a beneficiary requires an early refill, the prescriber must request an exception override of this requirement by seeking approval from DOM's Pharmacy Benefits Manager.